Substitute for form 1449A/PTO				Complete if Known		
				Application Number	10/695,976	
	FORMATION DICK		OUDE	Filing Date	October 28, 2003	
	FORMATION DISC			First Named Inventor	Noe, Amanda	
STATEMENT BY APPLICANT (Use as many sheets as necessary)				Art Unit	2188	
				Examiner Name	Walter, Craig E.	
Sheet	1 .	of	2	Attorney Docket Number	015114-064700US	

U.S. PATENT DOCUMENTS							
Examiner Initials*	Cite No.1	Document Number	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear		
		Number Kind Code <sup>2 (# known)</sup>					
/CW/	AA	US-6728492 B1	April 27, 2004	Baroncelli			
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	AD	US-					
_	AE	US-					
	AF	US-			•		

FOREIGN PATENT DOCUMENTS										
Examiner	Cite No. <sup>1</sup>	Foreign Patent Document			Publication Date	Name of Patentee or	Pages, Columns, Lines,			
Initials*		Country Code <sup>3</sup>	Number <sup>4</sup>	Kind Code <sup>5</sup> (if known)	MM-DD-YYYY	Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear	T <sup>6</sup>		
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Examiner Signature	/Craig Walter/	Date Considered	12/04/2007
o.g		Considered	12/04/2001

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Substitute	for form 1449B/PTO			Complete if Known		
				Application Number	10/695,976	
INFO	RMATION DIS	CLOS	SURE	Filing Date	October 28, 2003	
STAT	<b>EMENT BY A</b>	PPLIC	ANT	First Named Inventor	Noe, Amanda	
				Art Unit	2188	
٠,	(Use as many.sheets as i	necessary)		Examiner Name	Walter, Craig E.	
Sheet	2	of	2	Attorney Docket Number	015114-064700US	

NON PATENT LITERATURE DOCUMENTS								
Examiner Initials *	Cite No. <sup>1</sup>	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.	T²					
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	BD							
	BE							

Examiner	/Craig Walter/	Date	42/04/2007 :
Signature	/Craig Walter/	Considered	12/04/2007

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1 Applicant's unique citation designation number (optional). Applicant is to place a check mark here if English language Translation is attached.